# Health Risk Profile

<u><b>At I</b></u> Y	Risk N	1.	Weight above healthy weight range (see chart on back)	African A African A of Hispan Of Hispan (1) Native A: Asian / P. Other	White, not of Hispanic origin	neity: (circ
Y	N		Blood Pressure (see chart on back)  a) B.P. ≥ 140/90 mm/Hg  b) personal history of high blood pressure c) family history (first-degree relative)  d) above healthy weight range e) lack of exercise	rican American, not Hispanic origin trive American dian / Pacific Islander her	ot of origin	le one)
Y	N	3. 	Cholesterol  a) > 5 years since last normal screen or cholesterol test or never done b) > 1 year since previous abnormal test		Dat	Name:
Y	N	4.     	Immunization a) > 10 years since last Td b) ≥ age 65 and has not yet received pneumococcal vaccine c) ≥ age 65 and has not had flu vaccine if it is flu season		Date of Birth:	no.
Y	N	5. 				
Y	N	6. 	Breast Exam a) age 20-39 and > 3 yrs. since last clinical breast exam b) ≥ age 40 and > 1 yr. since last clinical breast exam c) does not examine breasts monthly	(	Age:	
Y	N	7.	<b>Mammogram:</b> ACS recommends: women 40-49 years of age receive a screening mammogram every 2 years and women age 50 and older receive a screening mammogram annually. Not up to date with ACS standards			
Y	N		Pap Smear: ACS recommends: annual Pap smear at onset of sexual activity. If 3 or more satisfactory, normal, annual exams, the Pap may be performed every 1-3 years.  a) Not up to date with ACS standards History of any of the following:  b) genital warts  d) multiple sex partners		Male Female	Date of Visit:
Y	N		c) sexually transmitted disease		ale	Vicit
Y	N	10. 	a) has family history of skin cancer b) frequent sun exposure		I.D. or S.S	
Y	N	11.	STD/HIV: The following are risk factors for STD's such as HIV, syphilis, gonorrhea, and chlamydia.  Answer yes if <u>any</u> of these apply to you. (Do not need to specify which risk factor client has.)  a) history of injecting drug use (IDU)  b) male to male sex  c) history of STD  d) multiple sex partners		.# '	Clinic:
Y	N	12. □ □	b) health care worker			15.
Y	N	13. 	b) family history of diabetes (first-degree relative)			
Y	N	14.	Smoking currently smokes			
Y	N	15.	Physical Activity does not exercise at least 30 minutes / 3 times per week			
Y	N		Nutrition a) above healthy weight range b) does not eat 5 fruits or vegetables per day c) high fat in diet  d) excess sugar in diet e) excess salt in diet		(	Clinician
Y	N		Safety a) does not always wear seatbelts while in car b) drives after drinking or rides with a driver who has been drinking c) has gun and ammunition in same place (loaded or unloaded) d) does not have smoke detectors in home			ž.
Y	N	18.	Family Planning Not ready to have a child, and does not use birth control			
Y	N		Alcohol and Drug Use a) For women: are you pregnant and do you drink alcohol or use drugs b) ever felt you ought to cut down on drinking or drug use c) people ever annoyed you by criticizing your drinking or drug use d) ever felt bad or guilty about your drinking or drug use e) ever had a drink first thing in the morning to steady your nerves or get rid of a hangover			

#### **Blood Pressure Screening Guidelines**

Blood 1	creening Pressure a Hg)*	Follow-up Recommended**	
Systolic	Diastolic		
<130	<85	Recheck in 2 years	
130-139	85-89	Recheck in 1 year***	
140-159	90-99	Confirm within 2 months	
160-179	100-109	Evaluate or refer to source of care within 1 month	
180-209	110-119	Evaluate or refer to source of care within 1 week	
•210	•120	Evaluate or refer to source of care immediately	

- \* If the systolic and diastolic categories are different, follow recommendations for the shorter time follow-up (e.g., 160/85 mm Hg should be evaluated or referred to source of care within 1 month).
- \*\* The scheduling of follow-up should be modified by reliable information about past blood pressure measurements, other cardiovascular risk factors, or target-organ disease.
- \*\*\* Consider providing advice about lifestyle modifications.

The Fifth Report of the Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure, National Institute of Health, January 1993, NIH Publication No. 93-1088.

## **Standard for Adult Health Program**

# **Healthy Weight Chart**

Height*		Females**	Males***
4'10"	(58")	95-130	100-130
4'11"	(59")	95-130	105-135
5'	(60")	100-135	110-140
5'1"	(61")	105-140	110-145
5'2"	(62")	105-145	115-150
5'3"	(63")	110-150	120-155
5'4"	(64")	115-155	125-160
5'5"	(65")	115-160	125-165
5'6"	(66")	120-165	130-170
5'7"	(67")	125-170	135-175
5'8"	(68'')	130-175	140-180
5'9"	(69")	130-180	140-185
5'10"	(70")	135-185	145-190
5'11"	(71")	140-195	150-195
6'	(72")	145-200	155-200
6'1"	(73")	145-205	160-210
6'2"	(74")	150-210	165-215
6'3"	(75")	155-215	170-220
6'4"	(76")	160-220	170-225

- \* Without shoes
- \*\* From the healthy BMI range of 19.1 to 27.3 derived from three reference populations: the 1959 and 1983 Metropolitan tables and NHANES II.
- \*\*\* From the healthy BMI range of 20.7 to 27.8 derived from three reference populations: the 1959 and 1983 Metropolitan tables and NHANES II.

Texas Department of Health 7/93 Public Health Nutrition Services Program

#### **NCEP II Guidelines**

### **CHD Risk Factors**

"High Risk" is defined as two or more CHD Risk Factors:

H Age

Men • 45 Women • 55 or pr

Women • 55 or premature menopause without estrogen replacement therapy

- H Family history of premature CHD:
  Definite myocardial infarction or sudden death before age 55 in father or other male first-degree relative, or before age 65 in mother or other female first-degree relative.
- TM Current cigarette smoking
- <sup>TM</sup> Hypertension (• 140/90) or taking antihypertensive medication
- TM HDL Cholesterol < 35 mg/dl
- TM Diabetes mellitus

(TM = Modifiable risk factors)

If HDL is • 60 mg/dl, subtract one risk factor

Adapted from the Summary of the Second Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel II), JAMA, 1993; 269:3015-3023.